

§ 42 TAX CREDIT PROPERTY QUESTIONNAIRE for the tax year effective July 1, 2016

NAME AND LOCATION OF PROPERTY

OWNER AND ADDRESS OF RECORD

PROJECT NAME _____ OWNER _____

ADDRESS _____

(for multiple property accounts, especially scattered sites, please provide a list of each site address and tax account number)

TOTAL UNITS _____ # OF VACANT UNITS _____ TYPE: Townhouse, Garden, Mid Rise, High Rise, Mixed
YEAR BUILT _____ # OF STORIES _____ CONDITION _____

Check Services & Utilities in Rent: Heat () A/C () Gas () Electricity ()
Carpets () Drapes () Washer/Dryer () Swimming Pool () Party Room ()
Tennis () Parking () Switchboard () Security ()

Rent Per Month Schedule:	Total Units	30% Median		40% Median		50%Median		60%Median		Market Rate		Other (Mgr, etc.)	
		units	rent	units	rent	units	rent	units	rent	units	rent	units	rent
Effic.													
1 Bedrm.													
2 Bedrm.													
3 Bedrm.													
4 Bedrm.													
Other (list)													

Please identify any form of tenant subsidy, or rental assistance typical to this project. _____

When do rental restrictions expire? _____

Is there a payment in lieu of taxes? _____ If yes, the amount of property taxes paid? _____

Income and Expense Information: Please attach a copy of the 2014 operating statement.

Financial / Sales Information:

Please provide the following data regarding the first and second mortgages:

First mortgage lender _____	Second mortgage lender _____
Mortgage amount _____	Mortgage amount _____
Interest rate _____	Interest rate _____
Term of mortgage _____	Term of mortgage _____
First payment date _____	First payment date _____
Jan. 1, 2015 Balance _____	Jan. 1, 2015 Balance _____

Current dollar amount in Reserve For Replacement Account _____

Please provide: Date Purchased _____ Price Paid _____

Total Construction/Rehab Cost _____ Amount of Tax Credit Award _____

I declare, under the penalties of perjury, that the contents of this form and all the accompanying schedules and statements have been examined by me and are true, correct, and complete to the best of my knowledge, information, and belief.

Owner's Signature _____

Title of Signer _____

Date _____

Print/Type Name of Signer _____

Phone Number _____

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